

SITE SPECIFIC CHECKLIST

NORTH DAKOTA DEPARTMENT OF COMMERCE/DCS

SFN 52327 (03/06)

<p align="center">HOME <input type="checkbox"/> CDBG <input type="checkbox"/> ESGP <input type="checkbox"/></p> <p align="center">(Attach All Appropriate Agency Correspondence)</p>		
<input type="checkbox"/> Categorical Excluded Subject to 58.5	<input type="checkbox"/> Categorical Excluded Not Subject to 58.5	<input type="checkbox"/> Environmental Assessment
Location or Address of Site Reviewed		Project/Name
Project Description		
1. Is the structure vacant?		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Will the structure be vacated?		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Attach State Historical Society correspondence/clearance for this site.		Date of Clearance:
4. Is the site within, partially within or will it effect a 100 year floodplain? Include FEMA Map indicating location of projects or State Water Commission Letter		<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Is the project located outside the city limits? If yes, attach correspondence on Wetland, Farmland Protection, Endanger Species and complete below. Is new construction or relocation of a structure proposed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
6. Noise determination: Is the site within: 1,000 feet of a major roadway (4 lanes)? 3,000 feet of a railroad? 5 miles of a commercial airport? 15 miles of a military airfield? If yes and structure is uninhabitable, attach information on mitigation.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
7. Is above ground storage of hazardous materials, including but not limited to propane or gasoline storage tanks, visible from the site (within one mile)? If yes, complete reverse side.		<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Is the site within one mile of toxic chemicals/wastes (CERCLIS list)? If yes, attach EPA correspondence.		<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Is the site within 3,000 feet of the end of a runway of a commercial airport or 2.5 miles from the end of a runway at a military airfield? If yes, is it in: Commercial: <input type="checkbox"/> Runway Clear Zone Military: <input type="checkbox"/> Clear Zone <input type="checkbox"/> Accident Potential Zone (APZ)		<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Will the project effect Air Quality?		<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Will the project effect Sole Source Aquifers?		<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Will the project effect Wild & Scenic Rivers?		<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Is the density/capacity changed by more than 20%? Is the unit density changed by more than 20% (multi-family only)? Does the project involve changes in land use or zoning? Is the estimated cost of rehabilitation greater than 75% of the total estimated cost of replacement after rehabilitation?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
14. Will the environmental effects of this activity be disproportionally high and/or adverse on minority and low income populations?		<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Is the property free of hazardous materials, contamination, radioactive substances and toxic chemicals and gases?		<input type="checkbox"/> Yes <input type="checkbox"/> No
<p align="center">Person Completing Site Visit</p> <p>_____ Name of Recipient</p> <p>_____ Instrument Number</p> <p>_____ Signature & Title</p> <p>_____ Date</p>		<p align="center">DCS USE ONLY</p> <p>A site specific review was completed locally and then reviewed by State Program staff. Accordingly, it has been determined that this project is:</p> <p><input type="checkbox"/> Categorical Excluded/Exempt <input type="checkbox"/> Categorical Excluded Subject to 58.5 (<i>rehab</i>) <input type="checkbox"/> Categorical Excluded Not Subject to 58.5 (<i>closing cost</i>) <input type="checkbox"/> Environmental Assessment</p> <p><input type="checkbox"/> Costs may be incurred as of below date <input type="checkbox"/> Costs may not be incurred until an CE or an EA is completed</p> <p>_____ Authorized Signature</p> <p>_____ Date</p>

ABOVE GROUND STORAGE OF HAZARDOUS MATERIALS

1. Hazardous material(s):				
2. Distance of structure from hazardous material:				
3. Size of storage facility:				
4. Is any new construction proposed?				<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Will proposed rehabilitation increase the value of the structure by 75 percent or more?				<input type="checkbox"/> Yes <input type="checkbox"/> No
6. If the structure is vacant: Has it been condemned? Is it uninhabitable?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

Additional Comments:

NOTICE TO HOMEOWNER

The property located at _____ is located within one mile of the hazard(s) specified in number 1 of this page. This hazard could be dangerous to your safety, now or in the future and I hereby, **release** the Department of Commerce and the State of North Dakota from all such claims arising out of or resulting from the information disclosed in this document.

I, the undersigned Homeowner, affirm that I am at least 18 years of age, am freely signing this Notice, and have been informed that a hazard has been identified near my property. My signature acknowledges that I have reviewed, been advised, and fully understand the above "Notice to Homeowner." **I fully understand that by signing this form I am giving up legal rights** and/or remedies which may otherwise be available to me regarding any losses I may sustain as a result of the above Notice. I agree that if any portion is held invalid, the remainder will continue in full legal force and effect.

Signature of Homeowner

Date

Signature of Homeowner

Date